Health Check Outreach Project Annual Plan					
Participation Rate:	Fiscal Year	Rate	# Children Screened		
(Most recent Fiscal				1	
Year data)					
CY SFY FFY (Circle		1			
which reports you use)		1			
Projected Participation	Fiscal Year	Rate	# Children Screened	Projected Increase in the # children to be	
Goal for the Current	i ioodi i cai	rato	" Official Corcorda	screened in Current FY	
Fiscal Year		1		Screened in Current 1	
i iscai i eai					
List Your Strategies	for Reaching th	ne Projected	d Participation Goal f	or the Current Fiscal Year (attach	
additional sheets if r	needed)	•	•	,	
	100000)				
1					
				_	
1					
1					
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-					
Total Count of Eligible Cl	nildren	Drov	ious Year	Estimated # for Next Year	
Served by the County.	aron	riev	ious i edi	Estimated # 101 Next Teal	
(Use the monthly average	e for the 12				
	6 101 tile 12-				
month period.)					

List the Project's top four priorities for follow	ing children for the current year.
First Priority:	
Second Priority:	
Third Priority:	
Fourth Priority:	
Additional Comments:	
Signatures for Annual Goals Date	Date
Health Check Coordinator	Health Check Coordinator
Date Health Check Coordinator	Date Health Check Coordinator

Agency Director

Date

Health Check Supervisor

DMA State Consultant

Date

Date

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